United States Department of State



Washington, D.C. 20520

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May 14, 2019

ACTION MEMO FOR DEBORAH L. BIRX, AMBASSADOR-AT-LARGE; COORDINATOR OF THE UNITED STATES GOVERNMENT ACTIVITIES TO COMBAT HIV/AIDS AND U.S. SPECIAL REPRESENTATIVE FOR GLOBAL HEALTH DIPLOMACY

SUBJECT: West Africa Regional Operational Plan 2019 Approval

Recommendations

Approve the West Africa Regional Operational Plan (ROP) 2019 with a total budget of \$45,559,554 including all applied pipeline approved for FY 2020 implementation as well as the full amount of the two-year (FY 2020 and FY 2021) centrally funded Game Changer. This full budget includes the ROP 2019 bilateral budget of \$25,980,000 and the Game Changer budget of \$19,579,554 (\$12,515,986 for Year One and \$7,063,568 for Year Two). Funding is approved to achieve the targets and outcomes as listed in this memo and all appendices.

Total budget is reflective of the following programming:

| West Africa | New Funding | | | |
|-------------------|-----------------|------------|--------------|--|
| West Africa | (all accounts)* | Pipeline** | Total Budget | |
| Total Budget | 42,924,050 | 2,635,504 | 45,559,554 | |
| ROP 19 Bilateral | 23,344,496 | 2,635,504 | 25,980,000 | |
| Central TLS Funds | 19,579,554 | - | 19,579,554 | |
| Game Changer | 12,515,986 | = | 12,515,986 | |
| Game Changer 20 | 7,063,568 | - | 7,063,568 | |

^{*} New Funding may refer to FY 2019 or other FY appropriations newly allocated for implementation in FY 2020 with ROP 2019; accounts indicated in detailed tables.

Approve a total FY 2020 outlay for ROP 2019 implementation that does not exceed the total approved ROP 2019 bilateral budget and the Year One Game Changer budget of \$38,495,986, inclusive of all new funding accounts, central funds, and applied pipeline. Any prior year funds that are not included within this ROP 2019 budget and documented within this memo, its appendices and official PEPFAR data systems are not to be made available for execution and outlay during FY 2020 without additional written approval. The new FY 2019 funding and prior year funds approved within this memo as a part of the total ROP 2019 budget are allocated to achieve specific

^{**} Pipeline refers to funding allocated in prior years and approved for implementation in FY 2020 with ROP 2019

- 2 -

results, outcomes and impacts as approved. All requested Operational Plan Updates and shifting of funds – either between mechanisms and partners, or to add additional funding to mechanisms and partners for execution in FY 2020 or for the FY 2021 Game Changer funds – must be submitted to and approved by S/GAC.

Approved funding will be made available to agency headquarters for allocation to country platform to implement ROP 2019 programming and priorities as outlined below and in the appendix.

Approve access for the West Africa-Ghana PEPFAR program of up to \$49,880 in central funding for the procurement of condoms and lubricants.

West Africa Region must fully achieve approved ROP 2018 (FY 2019) treatment current (TX_CURR) targets (as applicable) in order to execute the ROP 2019 strategy. Suboptimal ROP 2018 performance jeopardizes ROP 2019 funding and may result in updates to this approval and a decrease to the ROP 2019 funding. All COP 2018 above site support for Ghana may be suspended pending the outcome of Ambassador Sullivan's discussions with the government of Ghana regarding its commitment to addressing the HIV/AIDS epidemic and any adjustments that it will make and document.

Background

This approval is based upon: the discussions that occurred between the country team, agency headquarters, S/GAC, indigenous and international stakeholders and implementing partners in Johannesburg, South Africa during the March 18-22, 2019 in-person planning meetings; the final ROP 2019 submission, including all data submitted via official PEPFAR systems or within supplemental documents; and the West Africa Region's virtual ROP 2019 approval with Ambassador Birx on April 23, 2019.

Program Summary

Funding and targets for PEPFAR West Africa's Regional Operational Plan 2019 support PEPFAR West Africa's vision to catalyze sustained epidemic control in West Africa by leveraging national and donor investments to implement adaptive, evidence-based interventions to reach, test, treat, and retain key poplutions (KPs) and people living with HIV/AIDS (PLHIV) in settings with the greatest HIV burden.

PEPFAR continues to align operations with the PEPFAR 3.0 strategy of "focusing resources and leveraging finances to address the most vulnerable

<u>UNCLASSIFIED</u>

- 3 -

populations." Seeking innovative and more efficient ways to fight the HIV/AIDS pandemic, PEPFAR has created an expanded regional model. The goal of this model is to increase the sharing of resources, administrative functions, and expertise across operating units within the region to more efficiently combat HIV/AIDS where commonalities exist among the epidemic and to increase funding and focus on critical activities that will lead to controlling the HIV pandemic in the region. In ROP 2019, the West Africa Region includes the countries of Ghana, Liberia, Togo, Burkina Faso, Mali, and Senegal.

In ROP 2019, three of the West Africa Region countries (Senegal, Mali and Liberia) will focus on achieving 90-90-90 within key populations through a mix of direct service delivery and targeted technical assistance; push for adoption and implementation with fidelity of key national policies; and invest in targeted above-site activities that directly impact the clinical cascade.

The PEPFAR program in Ghana will continue to work on supporting the government of Ghana's efforts to achieve 90-90-90 across the national cascade. PEPFAR will do this by focusing on one region, Western, directing all of its resources to achieving 90-90-90 for all populations within the region by September 2020. This focused approach will involve transitioning out of current site-level technical assistance (TA) and KP programming outside of the Western region and focusing above-site activities to support regional saturation. This shift in focus in Ghana is to support the Global Fund implementation that has failed to successfully achieve programmatically over the past three years putting Global Fund resources in the future at threat. Progress in Ghana has been stalled for over 24 months and continues to regress in performance in HIV programming.

Togo and Burkina Faso will accelerate implementation towards achieving 90-90-90 targets through direct service delivery, with a targeted focus on the highest burden sites for KP and PLHIV, and with technical assistance to other sites. There will be a focus on the implementation of key policies with fidelity such as test and start, index testing, enhanced peer outreach approach for KPs, and differentiated service delivery. The issue of informal user fees will also be addressed. Case-finding strategies will be targeted by population group and specific strategies will be put in place for antiretroviral treatment (ART) retention and viral suppression.

PEPFAR West Africa Region teams will work closely with their Global Fund counterparts to ensure effective coordination and execution on policy adaptations and joint programmatic strategies across all countries in the region.

- 4 -

PEPFAR programming will aim to complement and accelerate Global Fund programming in order to best leverage each other's investments.

The PEPFAR West Africa Region strategy to be implemented in FY 2020 is based on a thorough review of programmatic data, discussions with Ministries of Health, multilateral institutions, civil society/community organizations and implementing partners. ROP 2019 will support the implementation of key national policies (including all applicable PEPFAR minimum requirements) with fidelity down to the site level. In addition, overall, ROP 2019 will support the process to ensure key populations receive HIV services throughout the entire the cascade from prevention to viral suppression and work to eliminate informal user fees that are prohibiting patients from accessing HIV/AIDS services; currently all countries have policies prohibiting formal user fees for HIV/AIDS services. ROP 2019 will prioritize the implementation of evidence based approaches to address stigma and discrimination and the strengthening of laboratory and supply chain systems through regional technical assistance.

Across the 90-90-90 cascade, countries will support the scale-up of index testing, finalization of tenofovir/lamivudine/dolutegravir (TLD) transition plans, implementation of multi-month scripting, and the expansion of viral load testing to increase coverage and suppression rates. In addition, all countries within the region will focus on: the provision of a targeted and needs-defined package of prevention, testing, and treatment services for key populations and PLHIV networks; use of data to understand low viral load suppression rates; regular data collection and analysis to improve patient outcomes; use of site level data to take corrective actions when needed; and the use of Unique Identifier Codes to ensure patients receive HIV services across the clinical cascade.

PEPFAR West Africa Region is expected to ensure the following minimum program and policy requirements continue or are in place by the beginning of ROP 19 implementation (FY 2020) in order for funds to be disbursed. The minimum requirements for PEPFAR West Africa include: implementation with fidelity of Test and Start at all PEPFAR supported sites; adoption and implementation of differentiated service delivery models, including multimonth scripting (MMS) to improve ARV coverage; transition to TLD and removal of Nevirapine regimens; intensifying case finding by scaling-up of index testing; direct and immediate linkage of clients from testing to treatment across age, sex, and risk groups; elimination of all informal user fees in the public sector affecting access to HIV testing, treatment, and prevention; completion of VL/EID optimization activities in PEPFAR supported sites; advocacy for increased domestic resource mobilization; and scale-up of unique identifier for patients across all sites. In addition, by the end of ROP19 implementation (end of FY2020), the West Africa Region is expected to

<u>UNCLASSIFIED</u>

- 5 -

eliminate all formal and informal user fees for any primary services (such as ANC fees and index-testing referral fees) in anticipation of COP20 planning and funding.

In addition, in Liberia ROP 2019 will focus on work with civil society organizations to conduct increased testing in five "hot spots" for key populations. The PEPFAR team will provide support to 10 facilities, that when combined with one additional Global Fund supported facility, serve 95% of patients currently on ARVs. In these facilities, clinical staff, peer educators and "linkage coordinators" will work to link and keep PLHIV on treatment. To increase adherence and viral suppression rates, PEPFAR will also work on transitioning PLHIV to TLD and improving the supply chain.

The PEPFAR program in Mali will shift their geographic focus for FY 2020 to areas with higher HIV/AIDS prevalence among KPs, and the PEPFAR team will be analyzing their data weekly in order to better target their areas of focus, working with 15 KP-friendly treatment facilities to provide direct service delivery or technical assistance. To improve linkage and retention, PEPFAR in Mali will expand the peer navigator program and treatment services to community-based drop-in centers in ROP 2019 using community case managers to promote adherence to treatment and track PLHIV who have stopped taking treatment. Finally, ROP 2019 will support work to improve the viral load sample transport system.

The ROP 2019 focus in Senegal is on improving case finding (including index testing, social media outreach, mobile testing, and peer referrals). To increase linkage to treatment and retention, PEPFAR will use peer navigators and develop differentiated service delivery methods including multi-month scripting and mobile treatment. PEPFAR will also work on increasing the demand for viral load testing and improving the waiting time to obtain test results.

PEPFAR will collaborate with the Government of Ghana, civil society, and other partners to achieve epidemic control in the Western region of Ghana for all populations by September 2020. In addition ROP 2019 supports an increase in index and social network testing, active linkage to treatment, and finding and linking PLHIV who know their status but are currently not on treatment. Above-site work in Ghana will include eliminating informal user fees, improving data systems for PLHIV patient management, addressing structural barriers, and improving viral load demand creation and sample referral systems. Working with the government to adopt best practices learned from saturation of the region is a key component of the Ghana strategy.

Within ROP 2019 and using centrally allocated two-year "Game Changer" funds, Burkina Faso and Togo will focus on closing the gap to achieve 90-90-90 targets across the national cascade for all PLHIV, in collaboration with the

- 6 -

government, civil society, and other partners. The PEPFAR program in these countries will support: prevention services; targeted case-finding by population type; implementation of test & start at the site level; retention and adherence to treatment; viral load suppression; ensuring implementation of key national policies with fidelity down to the site level; removal of informal user fees; strengthening supply chain, lab, and data management systems; and addressing stigma and discrimination among people living with HIV/AIDS.

Finally, relative to other countries in the region, Burkina Faso and Togo have demonstrated the greatest progress on the clinical cascade. Therefore, Burkina Faso and Togo will receive \$19,579,554 in central Game Changer funds to accelerate national progress towards 90-90-90 targets in each country. Both countries will receive these funds in two, one-year performance based tranches. Year One will be released with COP 2019 for implementation over FY 2020. Funding for Year Two will be held in a TBD mechanism at S/GAC for programming with COP 2020 and implementation in FY 2021.

Game Changer Funds are allocated as follows:

| West Africa Gamechanger | Year One | Year Two | TOTAL |
|----------------------------|------------|-----------|------------|
| Burkina Faso | 6,115,986 | 4,296,233 | 10,412,219 |
| Togo | 6,400,000 | 2,767,335 | 9,167,335 |
| Total | 12,515,986 | 7,063,568 | 19,579,554 |

Funding Summary

All ROP 2019 funding summarized in the chart below is approved at the agency and account levels as indicated. <u>Funds are to be utilized to achieve the targets and outcomes and to fund implementing partners and Management and Operations costs (U.S. Government Costs of Doing Business) as documented in all PEPFAR systems and summarized in the appendix.</u>

- 7 -

| | | FY 2019 New | | Total Navy Front | A P d B' P | Total ROP 19 |
|------------------------------|------------|-------------|---------|------------------|-------------------|------------------|
| West Africa | GHP-State | | | Total New Funds | Applied Pipeline* | Bilateral Budget |
| DOD TOTAL | 1,050,000 | - | - | 1,050,000 | - | 1,050,000 |
| of which, Ghana | 400,000 | - | - | 400,000 | - | 400,000 |
| of which, Liberia | 350,000 | - | - | 350,000 | - | 350,000 |
| of which, Senegal | 300,000 | - | - | 300,000 | - | 300,000 |
| HHS TOTAL | 3,810,589 | - | 503,051 | 4,313,640 | 1,056,360 | 5,370,000 |
| HHS/CDC | 3,810,589 | - | 503,051 | 4,313,640 | 1,056,360 | 5,370,000 |
| of which, Burkina Faso | 980,000 | - | - | 980,000 | - | 980,000 |
| of which, Ghana | 380,589 | - | 203,051 | 583,640 | 1,056,360 | 1,640,000 |
| of which, Mali | 1,500,000 | - | 250,000 | 1,750,000 | - | 1,750,000 |
| of which, Senegal | 950,000 | - | 50,000 | 1,000,000 | - | 1,000,000 |
| STATE TOTAL | 80,000 | - | - | 80,000 | - | 80,000 |
| State | 50,000 | - | - | 50,000 | - | 50,000 |
| of which, Ghana | 50,000 | - | - | 50,000 | - | 50,000 |
| State/AF | 30,000 | - | - | 30,000 | - | 30,000 |
| of which, Ghana | 30,000 | - | - | 30,000 | - | 30,000 |
| USAID TOTAL | 17,900,856 | - | - | 17,900,856 | 1,579,144 | 19,480,000 |
| USAID, non-WCF | 16,515,200 | - | - | 16,515,200 | 1,579,144 | 18,094,344 |
| of which, Burkina Faso | 1,088,000 | - | - | 1,088,000 | - | 1,088,000 |
| of which, Ghana | 4,561,200 | - | - | 4,561,200 | 1,579,144 | 6,140,344 |
| of which, Liberia | 2,910,000 | - | - | 2,910,000 | | 2,910,000 |
| of which, Mali | 2,737,000 | - | - | 2,737,000 | | 2,737,000 |
| of which, Senegal | 3,307,000 | - | - | 3,307,000 | - | 3,307,000 |
| of which, Togo | 1,632,000 | - | - | 1,632,000 | - | 1,632,000 |
| of which, West Africa Region | 280,000 | - | - | 280,000 | - | 280,000 |
| USAID, WCF | 1,385,656 | - | - | 1,385,656 | - | 1,385,656 |
| of which, Ghana | 654,656 | - | - | 654,656 | - | 654,656 |
| of which, Liberia | 240,000 | - | - | 240,000 | - | 240,000 |
| of which, Mali | 263,000 | - | - | 263,000 | - | 263,000 |
| of which, Senegal | 228,000 | - | - | 228,000 | - | 228,000 |
| TOTAL | 22,841,445 | - | 503,051 | 23,344,496 | 2,635,504 | 25,980,000 |
| of which, Burkina Faso | 2,068,000 | - | - | 2,068,000 | - | 2,068,000 |
| of which, Ghana | 6,076,445 | - | 203,051 | 6,279,496 | 2,635,504 | 8,915,000 |
| of which, Liberia | 3,500,000 | - | - | 3,500,000 | - | 3,500,000 |
| of which, Mali | 4,500,000 | - | 250,000 | 4,750,000 | - | 4,750,000 |
| of which, Senegal | 4,785,000 | = | 50,000 | 4,835,000 | - | 4,835,000 |
| of which, Togo | 1,632,000 | - | - | 1,632,000 | - | 1,632,000 |
| of which, West Africa Region | 280,000 | - | - | 280,000 | - | 280,000 |

^{*} Pipeline refers to funding allocated in prior years, approved for implementation in FY 2020

| Game Changer | New FY 2019 Funds | Applied Pipeline | Total Budget for FY 2020 Implementation | |
|----------------|----------------------|------------------|---|--|
| TOTAL | 12,515,986 | - | 12,515,986 | |
| DOD | - | - | - | |
| State | - | - | - | |
| USAID TOTAL | 12,515,986 | - | 12,515,986 | |
| USAID, non-WCF | 7,868,582 | - | 7,868,582 | |
| USAID, WCF | 4,647,404 | - | 4,647,404 | |

GHP-State Funds: Upon the clearance of a FY 2019 PEPFAR GHP-State Congressional Notification (CN), funds will be made available for transfer to agency HQs as indicated in the above chart. Funds are made available for outlay in FY 2020 at approved ROP 2019 partner budget levels to achieve FY 2020 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. Upon receipt from S/GAC, agency headquarters will move the funds to the country platform via each agency's internal process.

CDC GAP Funds: With the receipt of this signed memo, CDC is approved to use CDC GAP funds, as indicated in the above funding chart. Funds are to be

- 8 -

made available for outlay in FY 2020 at approved ROP 2019 partner budget levels to achieve FY 2020 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. With this approval, CDC GAP funding may be made available to country teams per CDC internal processes and following agency requirements.

Applied Pipeline Funds: With the receipt of this signed memo, respective agencies are approved to use applied pipeline funds as indicated in the above funding chart. Funds are to be made available for outlay in FY 2020 at approved ROP 2019 partner budget levels to achieve FY 2020 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. Additional or remaining pipeline from previous year's activities that are not currently captured in the ROP 2019 total budget level and documented within ROP 2019 partner budgets are not to be executed or outlayed without written approval from the Global AIDS Coordinator.

FY 2020 Target Summary

FY 2019 funds are released and ROP 2019 applied pipeline is approved to achieve the following results in FY 2020.

<u>UNCLASSIFIED</u>

- 9 -

| West Africa Region | | SNU Prioritizations | | | | | |
|--------------------|-------------|---------------------|------------|------------|-----------|-----------|---------|
| | | | Scale-Up: | Scale-Up: | | Centrally | |
| | | Attained | Saturation | Aggressive | Sustained | Supported | Total * |
| | <15 | - | 3,524 | 225 | - | - | 3,749 |
| HTS_INDEX | 15+ | - | 31,444 | 12,415 | - | - | 44,117 |
| | Total | - | 34,968 | 12,640 | - | - | 47,866 |
| | <15 | - | 30,018 | 2,270 | - | - | 32,288 |
| HTS_TST | 15+ | - | 277,404 | 76,288 | - | - | 355,125 |
| | Total | - | 307,422 | 78,558 | - | - | 387,413 |
| | <15 | - | 3,310 | 230 | - | - | 3,540 |
| HTS_TST_POS | 15+ | - | 26,881 | 8,631 | - | - | 35,587 |
| | Total | - | 30,191 | 8,861 | - | - | 39,127 |
| | <15 | - | 3,149 | 280 | - | - | 3,429 |
| TX_NEW | 15+ | - | 28,530 | 8,040 | - | - | 36,640 |
| | Total | - | 31,679 | 8,320 | - | - | 40,069 |
| | <15 | - | 6,742 | 452 | - | - | 7,194 |
| TX_CURR | 15+ | - | 70,797 | 11,838 | - | - | 83,485 |
| | Total | - | 77,539 | 12,290 | - | - | 90,679 |
| | <15 | - | 4,407 | 408 | - | | 4,815 |
| TX_PVLS | 15+ | - | 43,670 | 9,404 | - 1 | - | 53,074 |
| | Total | - | 48,077 | 9,812 | - | - | 57,889 |
| CXCA_SCRN | Total (15+) | - | - | - | - | - | - |
| | <18 | - | - | - | 77.77 | - | - |
| OVC_SERV | 18+ | - | - | - | | - | - |
| _ | Total | - | - | - | - | - | - |
| OVC_HIVSTAT | Total (<18) | - | | _ | - | - | _ |
| | <15 | _ | 3,318 | 516 | _ | - | 3,834 |
| PMTCT_STAT | 15+ | _ | 47,616 | 10,269 | _ | _ | 58,087 |
| | Total | - | 50,934 | 10,785 | _ | - | 61,921 |
| | <15 | - | 339 | 52 | _ | - | 391 |
| PMTCT_STAT_POS | 15+ | _ | 5,322 | 1,144 | _ | _ | 6,470 |
| | Total | - | 5,661 | 1,196 | _ | _ | 6,861 |
| | <15 | _ | 322 | 49 | _ | - | 371 |
| PMTCT_ART | 15+ | _ | 5,062 | 1,087 | _ | _ | 6,152 |
| | Total | - | 5,384 | 1,136 | _ | - | 6,523 |
| PMTCT_EID | Total | - | 5,669 | 1,245 | - | - | 6,918 |
| | <15 | - | - | | _ | - | - |
| PP_PREV | 15+ | | - | _ | _ | _ | 5,754 |
| | Total | - | - | - | _ | - | 5,754 |
| KP_PREV | Total | - | 22,209 | 37,226 | - | - | 59,444 |
| KP_MAT | Total | - | - | - | - | - | - |
| | <15 | - | - 1 | - | - 1 | - | - |
| VMMC_CIRC | 15+ | - | - | - | - | - | _ |
| | Total | - | - | - | - | - | _ |
| HTS_SELF | Total | - | - | - | - | - | - |
| PrEP_NEW | Total | - | - | - | - | - | - |
| PrEP_CURR | Total | - | - | - | - | - | - |
| THE _COM | <15 | _ | _ | _ | _ | _ | _ |
| TB_STAT(N) | 15+ | _ | - | _ | - | _ | _ |
| .5_6() | Total | - | - | - | _ | - | _ |
| | <15 | _ | _ | | _ | - | _ |
| TB_ART (N) | 15+ | _ | - | | _ | | _ |
| 15_/ 111 (14) | Total | - | - | - | - | - | - |
| | <15 | - | - | <u> </u> | - 1 | | - |
| TB_PREV (N) | 15+ | | - | | _ | _ | _ |
| ID_I NEV (IV) | Total | <u>-</u> | - | - | - | | _ |
| | <15 | <u> </u> | - | <u> </u> | - | | - |
| TX_TB (N) | 15+ | <u> </u> | - | <u> </u> | - | | - |
| וא] פו_או | Total | <u>-</u> | - | - | - | - | |
| | | • | - | • | | • | - |
| GEND GBV | Total | | | | | | - |

Budgetary Requirements

- 10 -

The West Africa Region has programmed FY 2019 funding in support of required earmarks as follows:

| | FY 2019 COP19 |
|--|----------------|
| Earmarks | Funding Level* |
| Care & Treatment | 8,563,055 |
| HKID Requirement | - |
| Preventing and Responding to Gender-based Violence | 435,000 |
| Water | - |
| * Does not include central funds | |

Partner Management and Stakeholder Engagement

Agreements made during ROP discussions, including those regarding geographic focus, targets, budgets, SIMS, use of pipeline, partner implementation and partner management will be monitored and evaluated on a regular basis via both ad hoc check-ins and discussions as well as the joint HQ and country team POART discussions. It is expected that teams closely monitor partner performance and engage with each implementing partner on a regular basis to ensure achievement of targets, outcomes and impact in a manner consistent with the this memo, approved SDS, and budgets and targets as finalized in PEPFAR systems. Any partner found not to be on track to achieve 80% of its approved targets or outcomes by the end of the second quarter must be placed on an improvement plan with clear benchmarks to measure improvement. The country team should notify the S/GAC Chair and PPM immediately of the improvement plan.

Continued engagement with all stakeholders, including civil society and community members, multilateral partners and bilateral partners, is to continue throughout ROP implementation. Core to this critical engagement is the sharing of and discussion surrounding quarterly results and achievement. This continued engagement will ensure all parties' understanding of the West Africa Region's progress and help identify any strategic changes to be made in order to more efficiently and effectively reach epidemic control.